



# EmployeeUPDATE

*Our Mission: To serve the people of North Carolina by enabling individuals, families and communities to be healthy and secure, and to achieve social and economic well-being.*

A monthly publication for employees of the North Carolina Department of Health and Human Services

## SERVNC helps shape quick response to icy Kentucky

When ice-ravaged Kentucky sent out a call for help in January, North Carolina met the request by deploying two teams of medical personnel within 24 hours.

The need was served via the Emergency Medical Assistance Compact (EMAC), a mutual aid agreement that allows states to assist one another.

The quick response is due in part to training as well as the state's SERVNC system, which identified and deployed the response teams to Crittenden County, Ky., to augment local hospital staffing.

"This deployment was the first since we've organized through SERVNC. It showed our system is working," said Drexdal Pratt, chief of the N.C. Office of Emergency Medical Services. "I want to thank all who participated in the sharing of these personnel, equipment and resources for their roles in this important response to Kentucky's emergency situation."



Drexdal Pratt, chief of the N.C. Office of Emergency Medical Services

The 15 people deployed made up two teams and stayed on the job for two weeks. One team consisted of an OEMS team leader, a physician, a physician assistant, five nurses and a pharmacist. The other consisted of one OEMS team leader and five nurses.

The teams assisted local officials in the set up of a special medical needs section within a shelter opened for area residents in Crittenden County. They also provided staffing at Crittenden

Hospital and Livingston Hospital in the areas of medical surge floor beds, emergency department, an outpatient clinic and the pharmacies within the hospitals.

The teams also were asked to assure that basic medical needs were being met at another local shelter.

SERVNC was set up in April 2007 under Pratt's leadership. The system has already been used to register 3,700 professionals with contact information, skills, and availability to respond. Rosters include doctors, nurses, other allied health professionals, as well as non-medical volunteers, such as dispatchers, administrative assistants, fire fighters and law enforcement personnel.

The system automatically verifies any professional licenses registrants have through electronic interfaces with the state's boards of Nursing, Respiratory Care, and Pharmacy, the N.C.

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Medical Board, N.C. Office of EMS, and national databases, including DEA licensing. The system also evaluates the volunteer's experience and assigns an emergency credential level, a numeric value which helps ensure that deployed volunteers possess the education, license, skills and current practical experience needed to support a response.

NCOEMS uses the SERVNC system to augment staffing in the event of deployment of any of the State Medical Assistance Team II (SMAT II) M8 units. The M8s are hospital-based units that include physical resources and the full complement of personnel required to

establish and operate a 50-bed field hospital. There are eight M8s in North Carolina.

"This system helps to assure that we can provide a quick and effective response, whether the need occurs in our own back yard or in one of our neighboring states," Pratt said. ■

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## **April is Public Health Month in North Carolina**

The goal of Public Health Month is to increase North Carolinians' awareness of the need for public health and to bring attention to the ways public health improves and protects people's quality of life.

The state has had a public health system for 129 years. There are currently 86 local health departments providing services to all residents of the state's 100 counties. Many of those departments celebrate public health month in their communities with activities such as health fairs, tours and media interviews.

Often, people think of public health as the agency in the community that conducts restaurant sanitation inspections, ensures safe drinking water, or provides vaccines for school children. However, local public health departments work to improve the health and well-being of the whole community by controlling and eliminating infectious diseases, promoting healthy lifestyle practices, and preparing for natural or man-made emergencies.



### **Healthy North Carolina**

Public health also plays a critical role in eliminating health inequities and preventing chronic diseases and injuries, resulting in improved productivity and decreased health care costs for all of North Carolina's citizens—a special concern in the current economic climate. Since 2000, the state has experienced improvements in a number of health indicators, including a 20 percent decline in heart disease death rates; a 32 percent decline in stroke death rates; and a 17 percent decline in the teen pregnancy rate among minorities.

Nationally, the American Public Health Association celebrates Public Health Week in early April, centering on a theme of importance to the public's health. This year, National Public Health Week is April 6 - 12; the theme is "Building the Foundation for a Healthy America."

To learn about what public health does for you or to find out more Public Health Month in North Carolina, go to **[www.ncpublichealth.com](http://www.ncpublichealth.com)**. For more information on National Public Health Week, go to **[www.nphw.org/nphw09](http://www.nphw.org/nphw09)**. ■

## Cansler names two to improve state facilities

Health and Human Services Secretary Lanier Cansler named two new appointees to improve hospital administration and quality assurance at facilities statewide.

“These positions will be the cornerstone of the team enhancing care and safety in our facilities providing the care our citizens deserve and expect,” Cansler said.

J. Luckey Welsh Jr., former president and CEO at Southeastern Regional Medical Center in Lumberton, will serve as director of the state’s Mental Health, Developmental Disabilities, and Substance Abuse facilities.

“I look forward to embarking on a journey of excellence in the state’s facilities,” Welsh said.

Welsh spent the past 40 years in the health care industry, and served as Chairman of the NC Hospital Association. He began his career at Southeastern Regional in 1969, as Director of Pharmacy and Purchasing, Senior Vice President and Chief Operating Officer in 1976 and President from 1995 until 2007. He received a Master of Public Health Administration from University of North Carolina at Chapel Hill and pharmacy degree from Mercer University in Macon, Ga.

Cecelia Karas, a former mental health consultant with a national reputation for quality service, will direct Health and Human Services’ Training and Quality Assurance Initiative.

“I’m looking forward to creating focus on improving care and providing a safe place for patients,” Karas said.

Karas is a former Mental Health interim Team leader at Heartland Regional Medical Center in St. Joseph, Mo., and contract Director of nursing services at a Metropolitan hospital in Houston. She also worked as a contract director of Psychiatric services for Costal Plain Hospital with Nash Healthcare systems in Rocky Mount. She received her M.S.N. in Nursing Administration from Villanova University, Philadelphia PA, B.S.N. in Nursing at Towson State University in Towson MD. ■



J. Luckey Welsh Jr., director of Mental Health, Developmental Disabilities, and Substance Abuse facilities



Cecelia Karas, director of Health and Human Services’ Training and Quality Assurance Initiative

## McCoy heads DHHS Office of Public Affairs

Department of Health and Human Services Secretary Lanier Cansler announced the appointment of Renee McCoy as director of the department's Office of Public Affairs.

The post is responsible for directing and overseeing all internal and external communications for the department and serves as chief spokesperson to the media.

"We are extremely excited about the level of experience Renee McCoy brings to the department as we progress to a new direction of rebuilding our state's services and institutions," Cansler said.

McCoy, a 25-year television news veteran, worked at WRAL and as a freelance reporter/anchor at NBC-



Renee McCoy, director of  
DHHS Office of Public Affairs

17 and UNC-TV. She also taught communications/journalism as an adjunct instructor at Peace College and Meredith College in Raleigh. McCoy started a Raleigh-based media consulting company in 1999.

"I'm looking forward to returning to public service and joining Secretary Cansler and the DHHS team as they work to improve the statewide Health and Human Services system," McCoy said.

During the first two months of his administration, Cansler has adopted an agency-wide focus on enhancing trust and confidence in the department as well as a Zero Tolerance Policy in his approach to implementing changes at DHHS facilities across the state.

McCoy worked as director of public relations for the N.C. Department of Correction in 1986, during the administration of Gov. Jim Martin. ■

## April is Child Abuse Prevention Month

You can make a difference in the lives of North Carolina's children.

To prevent abuse and neglect, you can:

- Be a nurturing parent.
- Help a friend, neighbor, or relative who is having trouble with family.
- Educate parents you know about healthy child development or healthy parenting.
- Get involved – advocate for services that help families.
- Volunteer at a local child maltreatment prevention program.
- Help develop parenting resources at your local library.
- Ask for help for yourself.
- Tell parents in your community that parenting is hard.
- Offer your support to parents in your community.
- Be a foster parent.



### DID YOU KNOW?

North Carolina law requires all adults to report suspected child maltreatment. You do not need proof that maltreatment has occurred; you only need reasonable cause to suspect maltreatment. You do not need anyone's permission to file a report. You can report anonymously; even if you give your name, it will not be revealed. Reports should be made to the local department of social services or to law enforcement. Remember, it is your job as an adult to help protect children.

For more information on preventing child abuse, go to the Prevent Child Abuse North Carolina web site, [www.preventchildabusenc.org](http://www.preventchildabusenc.org). ■

# THE Cultural Competency CORNER

*By Gloria Sánchez, Latino Public Information Officer*



## Increase diversity in the workforce

*The number of minorities in the United State workforce is increasing, yet minorities are underrepresented in many occupations. U.S. Census Bureau estimates project that by 2050, minorities will make up 55 percent of the working age population in the United States. The Census Bureau reported in 2007 that about one in three U.S. residents was a minority. Today, Latinos are the largest minority group, African-Americans are second, and Asians the third largest minority group.*

As North Carolina experiences also some of the same diversity trends, more employees are beginning to value diversity in their staff and recognize that it is a good practice to have employees who are attuned with the diverse population they serve.

However, it is important to point out that diversity in the workforce is more than race, but also a full array of individual differences among people that includes but it is not limited to age, gender, disability, ethnicity, or religion.

Having the staff that understands the culture or language of the diverse population we serve is a great asset when coordinating and planning outreach activities, developing messages, and building and maintaining community networks. And ultimately, a diverse staff is the key component to impact the healthcare status and improve the wellbeing of all populations. Your workforce should look like your population base.

If your program is interested in attracting a diverse pool of job candidates, here are a few tips to help you recruit and retain diversity:

1. Think of ways to attract a variety of candidates. Everyone wants to find an employer who gives them opportunities for advancement and a decent salary.
2. Be pro-active in recruiting. Don't just post the position, but advertise it or circulate it in diverse professional organizations, newspapers and minority colleges.

3. When possible, have a diverse panel of interviewers.
4. Do not make assumptions about candidates. Let candidates present themselves.
5. Ask candidates to describe previous experience working with minorities or underrepresented groups. Successful candidates must be committed to working with diverse populations.
6. Encourage development and promotion of a diverse workforce, and
7. Ensure a diverse and highly competent workforce at all levels.

There is an untapped diverse pool of qualified candidates who could be great assets to your team; the key is reaching out to them. ■

¡Hasta pronto!

Gloria Sanchez

# Newborn screening panel to include cystic fibrosis

Babies born in North Carolina will soon be screened for cystic fibrosis (CF) when their newborn screening specimens are sent to the North Carolina State Laboratory of Public Health. The addition of this common genetic disorder to the current panel of tests was approved by the state legislature in 2008. The new test begins in the spring of 2009.

North Carolina joins a growing number of states currently screening newborns for CF in an effort to improve the quality of life for affected individuals. Babies are already screened for more than 30 disorders by the State Laboratory of Public Health. The whole panel of tests requires just a few drops of blood from a small “heel stick,” or prick, before each baby leaves the hospital. The new test will not require any additional drops of blood.

The State Lab will work closely with follow-up personnel in the Children and Youth Branch, Division of Public Health to ensure all babies with abnormal CF newborn screening results receive appropriate follow-up and referrals.

Cystic fibrosis is the most common genetic disease among Caucasian babies, with an incidence of one in 2,500 live births. The disease also occurs in one in 6,000 Hispanic births, one in 10,000 African-American births, and one in 90,000 Asian-American births. Eighty-five percent of babies with CF do not show symptoms at birth, so without newborn screening, most would not be diagnosed until after one year of age.



The most serious complications of CF occur in the lungs. Thick, accumulated mucous causes frequent lung infections and blockages of the airway, often causing permanent lung damage. CF can also obstruct the pancreas and severely limit the organ's ability to break down food and absorb nutrients. As a result, a child may have poor growth, weight loss, abdominal pain and other problems. These symptoms can be greatly improved through the replacement of pancreatic enzymes and careful diet planning.

The addition of CF to the state's newborn screening panel will further improve the lives of North Carolinians with cystic fibrosis. Newborn screening for CF allows for early diagnosis and therapy intervention. Studies have shown that patients diagnosed soon after birth have improved nutritional status, growth, lung function and experience fewer hospital stays, resulting in longer, healthier lives. In 1955, children with CF were not expected to live beyond age six. Today, adults with this disease are living into their 40s and have lives that include careers, marriage and families of their own. ■



# DIABETES

## *advocacy day*

On March 24, diabetes advocates from across the state converged on the N.C. General Assembly for the 2<sup>nd</sup> annual Diabetes Advocacy Day. The event was created to educate members of the N.C. General Assembly about diabetes prevention and control activities in our state and to raise awareness of diabetes as a significant health problem facing North Carolina citizens daily.

The day began with a diabetes awareness walk around Halifax Mall behind the legislature, followed by a program during which parents spoke about their children with diabetes. One father, Bud Howe, drew everyone's attention when he said that his daughter with diabetes was his "hero."

State Health Director Jeff Engel presented several facts about diabetes, noting that nearly 38,000 non-Medicare state employees have

diabetes and that in 2006, the costs to the state health plan for diabetes-related concerns exceeded \$390 million. Dr. Joseph Konen, N.C. Diabetes Advisory Council chair, pointed out that more than 600,000 North Carolinians have diabetes and approximately 400,000 more have pre-diabetes.

State Rep. Doug Yongue and Sen. Phil Berger talked to participants about the importance of keeping children with diabetes safe at school. In 2002, North Carolina became the fourth state to pass legislation that specifically addressed care for schoolchildren with diabetes.

The second half of the day was filled with an educational health fair that took place in the 1100 and 1200 courts of the General Assembly. A total of 62 health fair visitors had their vision screened and almost 100 had their blood pressure checked. There were also educational blood glucose

tests and advice from physicians with the N.C. Academy of Family Physicians.

The N.C. Diabetes Advisory Council is a statewide group of diabetes stakeholders, appointed by the State Health Director, who are involved in diabetes care, education and advocacy. They are an advisory group to the N.C. Diabetes Prevention and Control Branch in the Division of Public Health. ■



# Adoption Profile

## Introducing Chiareek

Chiareek has a terrific personality and interacts well in conversation. He has an athletic build and enjoyed wrestling and track in middle school, but now would like to try gymnastics or football. Chiareek likes action movies and rap music. He likes to dance and says he's very good at it. Chiareek is excited about driving and wants to be a policeman when he grows up.

Chiareek attends mainstream classes at a new school where he has made a good adjustment. Assessments about his ability to stay focused should be ongoing to assure that Chiareek is in the best possible setting for academic success. Chiareek needs to be encouraged to participate in more activities that will keep his self-esteem in balance.



Chiareek, b. March 26, 1991

## A Family for Chiareek

Chiareek needs a loving, stable, and structured family willing to spend time with him on academics, self-esteem building activities, and continuing improvement for acceptable behaviors. He will benefit from positive, nurturing adoptive parents who will support and challenge his abilities socially, academically, and physically. His wishes should be the guideline as to whether he has contact with previous family members.

For more information on Chiareek or on adoption and foster care in general, call N.C. Kids Adoption and Foster Care Network toll-free at 1-877-NCKIDS-1 (1-877-625-4371).



### Eat Smart, Move More Health Tip



## Choose to Move More Every Day

Physical activity is essential for all of us. Children, adults and seniors can benefit from moderate activity every day. Take a walk with a friend, take the stairs instead of the elevator, or work in your yard. Dancing works too and is great fun! Thirty minutes or more of motion for adults and 60 minutes for children on most days can help keep you in shape and feeling good. Can't find a 30 minute chunk of time? Break it up throughout the day.

For more tips on how to move more every day where you live, learn, earn, play and pray, visit

[www.EatSmartMoveMoreNC.com](http://www.EatSmartMoveMoreNC.com)

